OPERATING PROCEDURE



OBSTETRICS & EMERGENCY CHILD BIRTH

Effective Date: Revised:

November 1, 1986 October 1, 2000

Approved By:

Approved By Operational Medical Director:

Mal Frake

BLS

- 1. Perform initial patient assessment and obtain pertinent medical history.
- 2. Maintain a patent airway and administer OXYGEN as needed.
- 3. Assess the patient for signs of impending delivery:
 - A. Number of previous deliveries vs. number of previous pregnancies.
 - B. Contractions < 2 minutes apart, lasting 30 to 45 seconds.
 - C. Crowning or bulging.
 - D. Mother feeling need to move bowels.
- 4. If the delivery does not appear imminent, position and transport in left lateral recumbent position.
- 5. Reassess the patient frequently.
- 6. If delivery is imminent, prepare for delivery:
 - A. Take body substance isolation precautions (gowns, mask, glasses).
 - B. Control delivery, prevent head from "exploding" from vagina.
 - C. Support the head during delivery.
 - D. Suction mouth and nose after delivery of the head.
 - E. Remove cord from around neck if needed.
 - F. Gently guide the head downward until the upper shoulder delivers.
 - G. Gently guide the head upward until the other shoulder delivers.
 - H. Keep the newborn at perineum level until the delivery is complete, the cord is clamped at 8 & 10 inches from the newborn, and the cord is cut between the clamps.
 - I. Care for the newborn per Neonatal Resuscitation Protocol.
 - J. Record the time of birth.

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- 7. If excessive postpartum hemorrhage is present:
 - A. Control external perineal bleeding by direct pressure to lacerations.
 - B. Perform uterine massage.
 - C. If possible, encourage the mother to nurse the newborn.
- 8. Prepare for delivery of the placenta during transport. Do not delay transport. Transport placenta with patient in a red plastic bag.

ALS ONLY

- 9. Connect patient to cardiac monitor and document rhythm strip.
- 10. Establish an IV of 0.9% Sodium Chloride. Initiate fluid resuscitation as necessary to maintain an acceptable blood pressure.

MEDICAL CONTROL ONLY

11. Administer 50/50 concentration of NITROUS OXIDE/OXYGEN